

Health, Beauty & Fitness...

Nurses in your doctor's surgery (cabinet)

by Deborah Loughran

Some of you may have noticed that there are nurses working in your doctor's surgery; others may have had consultations with the nurse. These nurses work within an association called ASALEE, (Action de Santé à Libérale En Equipe, **Liberal Medicine Action as a Team in english**). The nurses are known as IDSP, loosely translated as public health nurses.

The association was started by two General Practitioners, based near Parthenay, in 2005. They recognized an increasing need for health education, coupled with the growing demands of the clientele and also difficulty in recruiting new general practitioners (GPs) to work in the country, away from the bigger towns and cities.

The main objective is to improve the quality of patient care by delegating certain tasks usually only done by doctors, to specially trained nurses, thus freeing up the doctor's time for more complicated care.

ASALEE started as a trial with three nurses and has now expanded to over 35 nurses, which will increase to about 100 by the end of 2012. These nurses are based in surgeries **all around France**.

To begin with, the main remit of the nurses was health education and follow up for type 2 diabetics. However, it has now expanded to encompass other chronic diseases, (heart disease, pulmonary disease and cognitive function) as well as an input in the screening service. There is a future project for home monitoring of 'high risk' patients, which will involve placing devices in the home that will allow the patients to monitor their condition. The readings will be sent directly to the nurse via information technology.

The nurses work within specific protocols, which are approved by the HAS, (**Haute Autorité de la Santé, National Authority for Health in english**). They have an initial, as well as ongoing training, as the role is continually expanding and changing.

So what do these nurses really do?

Their main role is centered around health promotion and health education. Health education helps people better understand their condition, improves their health and can reduce health problems in the future. The nurses give advice, help and follow up with the management of chronic diseases, such as type 2 diabetes, but also



with the prevention of other illnesses, such as heart and pulmonary disease.

The consultations **can last around 45 minutes**, and are free. The frequency of follow ups are determined by the nurse and patient, according to their needs. Home visits are possible for those patients who have difficulty in getting to the surgery. Most nurses try and see all the diabetic patients from the practice at least once a year, **or more frequently**. Careful monitoring of diabetes and other chronic illness can reduce the need for hospital admissions, particularly emergency admissions, and can reduce the length of stay in hospital, should it be required.

Lifestyle changes (diet and exercise) is one of the biggest factors in the prevention and management of illness. Any guideline published by health researchers cites this as the first treatment to be tried.

Exercise and dietary changes may reduce the risk of developing diabetes and heart disease, may slow down the progression of these illnesses and may also help in the



management of raised blood pressure, raised cholesterol levels and some cancers. The diagnosis of a chronic illness, such as diabetes, means a lot of information and education is necessary. This is much easier to assimilate in small doses. Regular follow up consultations can help with motivation as well as monitoring. Lifestyle changes are not easy without some form of support and encouragement.

The nurse can offer advice on stopping smoking and can screen for some pulmonary problems, such as chronic obstructive pulmonary disease (COPD), using a test called spirometry. ASALEE nurses also offer cognitive testing; this is usually described as 'memory tests'; The aim of these are not necessarily diagnostic, more a way of monitoring possible cognitive and memory problems by doing the same tests at regular intervals. In this way, memory problems can be monitored and treated early, with possible support put into place before any difficulties arise requiring more urgent interventions.

In addition, the nurse also works with the patient **records**, by ensuring that all checks, blood tests or other examinations, are programmed and 'alerts' are posted in the notes so the doctor can ensure his patient is up to date with any investigations or screening (for example mammography or smears).

Just over a year ago, I was lucky enough to be given a job as an ASALEE nurse. Having worked as a practice nurse in the UK, I was interested to see how this would translate in France, with their very different health system. It has required a certain cultural change for the patients as well as the GPs as they are unused to having nurses in the practice and the patients are not used to not paying for a consultation, let alone a consultation with a nurse!

I divide my time between surgeries at Moncoutant and Bressuire. It is certainly not practice nursing as we know it in the UK, possibly that model of primary care would not fit in with the French health service, but it is a beginning. In the summer of 2012, the HAS gave ASALEE nurses the right to sign prescriptions for blood tests and investigations. ASALEE nurses are the first nurses in France to have that right and I am very proud to be a small part of it.